



PATENTS

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: Hiroshi Miyajima, et al.

Examiner: Denise S. Allen

Serial No: 10/004,660

Art Unit: 2872

Filed: December 3, 2001

Docket: 15126

For: MIRROR ROCKING MEMBER
FOR OPTICAL DEFLECTOR

Dated: May 15, 2003

Mail Stop Non-Fee Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

RESPONSE

Sir:

In response to the Official Action dated February 27, 2003, please amend the
above-identified application as follows:

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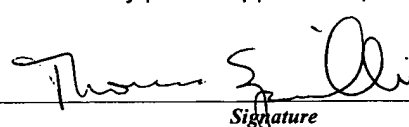
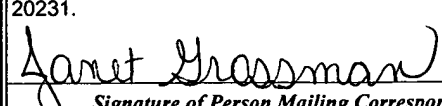
CERTIFICATE OF MAILING UNDER 37 C.F.R. §1.8(a)

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, Mail Stop Non-Fee Amendment, P.O. Box 1450, Alexandria, VA 22313-1450, on May 15, 2003.

Dated: May 15, 2003

Janet Grossman

2872

AMENDMENT TRANSMITTAL LETTER (Large Entity)				Docket No. 15126	
Applicant(s): Hiroshi Miyajima, et al.					
Serial No. 10/004,660	Filing Date December 3, 2001	Examiner Denise S. Allen		Group Art Unit 2872	
Invention: MIRROR ROCKING MEMBER FOR OPTICAL DEFLECTOR					
<u>TO THE ASSISTANT COMMISSIONER FOR PATENTS:</u>					
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	23 -	23 =	0 x	\$18.00	\$0.00
INDEP. CLAIMS	4 -	4 =	0 x	\$84.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00
<div style="float: right; text-align: right; border: 1px solid black; padding: 5px; transform: rotate(90deg);"> RECEIVED MAY 20 2003 TECHNOLOGICAL CENTER 2300 </div> <div> <input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ A duplicate copy of this sheet is enclosed. <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 19-1013/SSMP A duplicate copy of this sheet is enclosed. <input type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. </div>					
 _____ Signature			Dated: May 15, 2003		
<div style="display: flex; justify-content: space-between;"> <div> Thomas Spinelli Registration No.: 39,533 Scully, Scott, Murphy & Presser 400 Garden City Plaza Garden City, New York 11530 (516) 742-4343 </div> <div style="border: 1px solid black; padding: 5px; width: 300px;"> I certify that this document and fee is being deposited on 5/15/2003 with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Assistant Commissioner for Patents, Washington, D.C. 20231.  Signature of Person Mailing Correspondence Janet Grossman Typed or Printed Name of Person Mailing Correspondence </div> </div>					
CC:					